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Bib Data Sheet

CONFIRMATION NO. 1691

SERIAL NUMBER 09/891,945	FILING DATE 06/26/2001 RULE	CLASS 705	GROUP ART UNIT 2166	ATTORNEY DOCKET NO. 006311/010
APPLICANTS William Martin, Chicago, IL; ** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/215,158 06/30/2000 ** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/16/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY IL	SHEETS DRAWING 2	TOTAL CLAIMS 19 INDEPENDENT CLAIMS 2
ADDRESS Clifford Chance Rogers & Wells LLP 200 Park Avenue New York, NY 10166-0153				
TITLE Trade allocation				
FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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CONFIRMATION NO. 1691

SERIAL NUMBER 09/891,945	FILING OR 371(c) DATE 06/26/2001 RULE	CLASS 705	GROUP ART UNIT 3628	ATTORNEY DOCKET NO. 006311/010
APPLICANTS William Martin, Chicago, IL;				
** CONTINUING DATA ***** This appln claims benefit of 60/215,158 06/30/2000				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/16/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		STATE OR COUNTRY IL	SHEETS DRAWING 2	TOTAL CLAIMS 19
				INDEPENDENT CLAIMS 2
ADDRESS 21890				
TITLE Trade allocation				
FILING FEE RECEIVED 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	